

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 I.53(b))</i>	Attorney Docket No.	35683.0new
	First Inventor	Thor J. Johannsen
	Title	Belt Scraper Tensioning Device
	Express Mail Label No.	ER635563215US

USPTO
10/7/2003
111103

APPLICATION ELEMENTS		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents, P.O. Box 1450 Alexandria, Virginia 22313-1450
<i>See MPEP chapter 600 concerning utility patent application contents</i>		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification <i>[Total Pages / 11 /]</i> <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) <i>(35 USC 113)</i> <i>[Total Sheets / 3 /]</i> 5. <input checked="" type="checkbox"/> Oath or Declaration <i>[Total Pages / 3 /]</i> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</i> 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		
ACCOMPANYING APPLICATION PARTS		
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 17. <input checked="" type="checkbox"/> Other: <u>Checks in the amounts of \$385.00 and \$40.00</u> <u>Associate Power Of Attorney</u>		

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of the prior application No: /

Prior application information: Examiner: _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.
 The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number:		26712	<input type="checkbox"/> Correspondence address below		
NAME		R. Kent Roberts			
		Hodgson Russ LLP			
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CITY	Buffalo		STATE	New York	ZIP CODE
COUNTRY	United States of America		TELEPHONE	(716) 856-4000	FAX
Name (Print/Type)		R. Kent Roberts		Registration No. (Attorney/Agent)	40,786
Signature				Date	November 11, 2003

"Express Mail" Mailing Label Number ER635563215US

Date of Deposit November 11, 2003

I hereby Certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

R. Kent Roberts
Name

Signature

BFLODOCS: 869443 v1 (\$MV701!.DOC)

02570
FEET TRANSMITTAL
for FY 2004

Effective 01/01/2003. Patent Fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

(\$425.00)

Application Number	
Filing Date	November 11, 2003
First Named Inventor	Thor J. Johannsen
Examiner Name	
Group/Art Unit	
Attorney Docket Number	35683.0new

METHOD OF PAYMENT (check all that apply)**FEE CALCULATION (continued)**

Check Credit Card Money Order Other None

Deposit Account: Deposit Account Number: 08-2442

Deposit Account Name: Hodgson Russ LLP

The Director is hereby authorized to (check all that apply)

Charge fee(s) indicated below
 Charge any fee deficiencies or credit any overpayments
 Charge any additional fees during pendency of this application.
 Charge fees indicated below, except for the filing fee to the above-identified deposit account

3. ADDITIONAL FEES

Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	\$
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	\$
1053	130	1053	130	Non-English specification	\$

FEE CALCULATION

1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	\$
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1. BASIC FILING FEE

Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1804	920*	1804	920*	Requesting Publication of SIR prior to Examiner Action	\$
1805	1,840*	1805	1,840*	Requesting Publication of SIR after Examiner Action	\$

1001 770 2001 385 Utility filing fee

\$385	1251	110	2251	55	Extension for reply within first month	\$
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1002 340 2002 170 Design filing fee

\$	1252	420	2252	210	Extension for reply within second month	\$
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1003 530 2003 265 Plant filing fee

\$	1253	950	2253	475	Extension for reply within third month	\$
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1004 770 2004 385 Reissue filing fee

\$	1254	1,480	2254	740	Extension for reply within fourth month	\$
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1005 160 2005 80 Provisional filing fee

\$	1255	2,010	2255	1,005	Extension for reply within fifth month	\$
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SUBTOTAL (1)

\$385	1401	330	2401	165	Notice of Appeal	\$
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2. EXTRA CLAIM FEES FOR UTILITY/REISSUE

Fee Paid	1402	330	2402	165	Filing a brief in support of an appeal	\$
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Total Claims / 18 / - 20** = / 0 / x / 9 / =

\$0	1403	290	2403	145	Request for oral hearing	\$
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Independent Claims / 2 / - 3** = / 0 / x / 43 / =

\$0	1451	1,510	1451	1,510	Petition to institute a public use proceeding	\$
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Multiple dependent / 0 / x / 145 / =

\$0	1452	110	2452	55	Petition to revive - unavoidable	\$
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Large Entity**Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		
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1202 18 2202 9 Claims in excess of 20

1453	1,330	2453	665	Petition to revive - unintentional	\$
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1201 86 2201 43 Independent claims in excess of 3

1501	1,330	2501	665	10 advance copies	\$
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1203 290 2203 145 Multiple dependent claim if not paid

1460	130	1460	130	Petitions to the Commissioner	\$
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1204 86 2204 43 **Reissue independent claims over original patent

1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	\$
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1205 18 2205 9 **Reissue claims in excess of 20 and over original patent

1806	180	1806	180	Submission of Information Disclosure Statement	\$
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SUBTOTAL (2)

\$0	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	\$40
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SUBMITTED BY:

R. Kent Roberts

Reg. No. 40,786

1809	770	2809	385	Filing a submission after final rejection(37 CFR 1.129(a))	\$
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SIGNATURE*R. Kent Roberts*

1810	770	2810	385	For each add'l invention to be examined(37 CFR 1.129(b))	\$
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DATE: November 11, 2003

Telephone: (716) 848-1510

1801	770	2801	385	Request For Continued Examination (RCE)	\$
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1802	900	1802	900	Request for Expedited Examination of a design application	\$
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Other fee (specify)					
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*Reduced by basic filing fee paid					SUBTOTAL (3)	\$40
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Express Mail Mailing Label Number ER63556321USDate of Deposit November 11, 2003

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R. Kent Roberts

Signature *R. Kent Roberts*

November 11, 2003

Date of Signature BFLODOCS: 869442 v1 (\$MV601!.DOC)